

## Second Annual Grantee Meeting: Partnership Success!



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More than 250 Healthcare-associated Infections (HAI) prevention stakeholders came together for the second annual HAI Recovery Act Grantee Meeting at CDC in Atlanta on October 18-19, 2010.

"The grantee meeting showcased tremendous progress made as a result of the ARRA HAI funding. State HAI prevention programs are on track to make significant strides in preventing HAIs," said Dr. Arjun Srinivasan, Associate Director of HAI Prevention Programs in CDC's Division of Healthcare Quality Promotion.

The meeting was co-sponsored by the Office of Healthcare Quality of the U.S. Department of Health and Human Services (HHS), and gave participants a unique opportunity to share successes and challenges on HAI prevention-related topics, including panel discussions about:

- HAI Prevention Using the Comprehensive Unit-Based Safety Program (CUSP)
- Optimizing Use of NHSN Data for HAI Surveillance
- Partnering for Oversight and Prevention
- Sustaining Success in Prevention Collaboratives
- Using Data for Prevention
- Validation of HAI Surveillance Data

Participants included HAI prevention coordinators from all 50 states; Washington, DC; and Puerto Rico, as well as 13 Council of State and Local Epidemiologists (CSTE) fellows. Other representatives attending the meeting were from federal agencies, academic institutions and professional organizations including the Agency for Healthcare Research and Quality (AHRQ); Association for Professionals in Infection Control and Epidemiology (APIC); Association of Public Health Laboratories (APHL); Association of State and Territorial Health Officials (ASTHO); Centers for Medicare and Medicaid Services (CMS); National Association of County and City Health Officials (NACCHO); and Society for Healthcare Epidemiology of America (SHEA).

Presentations given during the meeting are available on the EPI-X HAI Forum.

Thank you for making the second annual HAI Recovery Act Grantee Meeting a partnership success!

## Policy Corner

On September 23-24, the U.S. Department of Health and Human Services (HHS) hosted "Progress Toward Eliminating Healthcare-associated Infections," a meeting of more than 170 HAI prevention stakeholders representing a broad range of disciplines. The purpose of the meeting was to:

- Review progress towards the five-year national HAI prevention targets in the HHS Action Plan for HAIs;
- Review draft sections in the revised Action Plan for reducing HAIs in outpatient settings, specifically ambulatory surgical centers (ASCs) and end-stage renal disease (ESRD) facilities; and
- Establish infection prevention goals for ASCs, ESRD facilities and for reducing the incidence of ventilator-associated pneumonia (VAP) in acute care hospitals.

During the meeting, progress toward several of the national HAI prevention targets using data from NHSN and the ABCs was reported, including an 18% reduction in central-line associated bloodstream infections (CLABSI), a 5% reduction in surgical site infections (SSI), and a 13% reduction in methicillin-resistant Staphylococcus aureus infections (MRSA). A summary of the meeting is currently being developed by HHS. An updated plan is scheduled to be released in 2011.

## Use of HAI Data Expands: CMS IPPS and State Access

A rule released in July by the Centers for Medicare & Medicaid Services (CMS) is adding more momentum to HAI prevention and elimination programs. Under this new regulation, facilities that participate in CMS' Hospital Inpatient Quality Reporting Program are required to report certain HAI events to CDC's National Healthcare Safety Network (NHSN). CDC will share those data with CMS, which will post the data publicly on Hospital Compare. Certain central line-associated bloodstream Infections occurring on or after Jan. 1, 2011 must be reported to NHSN; first quarter data is due by August 2011. Other infections, including surgical site infections, are expected to follow in 2012 and beyond.

Additionally, state departments of health may now access NHSN data beyond what is included in state mandates. States requesting such access are required to enter into a data use agreement with CDC. This change bolsters CDC's efforts to bring HAI prevention efforts into the traditional public health model, working closely with state health departments and healthcare facilities to reduce HAIs.

See NHSN and CMS information for further details about the requirements and changes.

## Regional HAI Trainings

CDC's Division of Healthcare and Quality Promotion (DHQP), in coordination with the Society for Healthcare Epidemiology of America (SHEA) and Avaris Concepts, LLC, is providing regional train-the-trainer workshops for all HAI Coordinators and up to two state health department staff from each state. The trainings were developed to assist state health departments in meeting objectives identified in HAI Plans for providing evidence-based prevention materials to their partners. The three-day workshops will provide participants with materials and related training about implementation methods to address the HHS priority prevention targets to eliminate healthcare-associated infections (HAIs).

There will be a total of 10 regional training workshops starting in late February 2011. Your PHA will send out more specific details regarding the registration process, dates, and agenda once finalized. However, please begin considering participating, as well as identifying up to two other members from your state health department who may want to participate.

Although DHQP will not be sponsoring travel for the workshops, registration and training materials costs for all participants will be covered.

Additional information is available on the Epi-X HAI Forum, which will house a listing of the trainings and schedules. If you have not received your invitation to join Epi-X yet, please let your PHA know.

